

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	10/1/99
O.I.P.E. CLASSIFIER		8	10-25-99
FORMALITY REVIEW	58523		11-2-99

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	10/1/99	
2	✓	10/1/99	
3	✓	10/1/99	
4	✓	10/1/99	
5	✓	10/1/99	
6	✓	10/1/99	
7	✓	10/1/99	
8	✓	10/1/99	
9	✓	10/1/99	
10	✓	10/1/99	
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47	✓	10/1/99	
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49	✓	10/1/99	
50	✓	10/1/99	

Claim	Final	Original	Date
51	✓	10/1/99	
52	✓	10/1/99	
53	✓	10/1/99	
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99	✓	10/1/99	
100	✓	10/1/99	

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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